10/19/2007 16:56

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Health Care Association Political Action Committee 1201 L. Street, NW ADDRESS (number and street) Check if different than previously DC 20005 Washington reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00006080 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 09 0 1 2007 09 30 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Robert Van Dyk Type or Print Name of Treasurer Electronically Filed by Robert Van Dyk 10 18 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Health Care Association Political Action Committee [®] D " D 0.9 0 1 2007 0.9 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand [°]2007 140530.01 January 1 (b) Cash on Hand at 138121.56 Begining of Reporting Period 43482.96 460021.22 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 181604.52 600551.23 6(a) and 6(c) for Column B) 19111.72 438058.43 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 162492.80 162492.80 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

(subtract Line 18(c) from Line 19)

American Health Care Association Political Action Committee

0 1 3^D0 М М м м 0 9 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 37808.66 428677.07 (i) Itemized (use Schedule A) 5674.30 28344.15 (ii) Unitemized (iii) TOTAL (add 43482.96 457021.22 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 43482.96 457021.22 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 -1000.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 4000.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 43482.96 460021.22 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 460021.22

43482.96

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:(a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	611.72	6458.43
Expenditures(c) Total Operating Expenditures		0400.40
(add 21(a)(i), (a)(ii) and (b))	🕨 611.72	6458.43
2. Transfers to Affiliated/Other Party	0.00	0.00
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	18500.00	431600.00
. Independent Expenditure		0.00
(use Schedule E)	Party	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	0.00	0.00
Loan Repayments Made	0.00	0.00
. Loans Made	0.00	0.00
. Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	200
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
		0.00
Other Disbursements	0.00	0.00
. Federal Election Activity (2 U.S.C 43	11(20))	
(a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
	0.00	0.00
(ii) "Levin" Share		0.00
(b) Federal Election Activity Paid Er With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (a	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(0.00	0.00
. Total Disbursements (add Lines 21(c), 22,	
23, 24, 25, 26, 27, 28(d), 29 and 30	10111 70	438058.43
. Total Federal Disbursements		
(subtract Line 21(a)(ii) from Line 30	***	
from Line 31)	19111.72	438058.43

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	43482.96	457021.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	43482.96	457021.22
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	611.72	6458.43
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	-1000.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	611.72	7458.43

			_
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6/32
	EMIZED RECEIPTS	or each category of the	(check only one)
I EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
Ar or	ny information copied from such Reports and Statement for commercial purposes, other than using the name a	nts may not be sold or used by any perso and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Λ	NAME OF COMMITTEE (In Full)		
	American Health Care Association Political A	Action Committee	
Α.	Full Name (Last, First, Middle Initial) David Beck		Date of Receipt
	Mailing Address 1250 H St NW Ste 555		09 27 2007
	City	ate Zip Code	Transaction ID: C348028
	<u>Washington</u> D	C 20005-3965	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		125.00
	Beverly Enterprises	cupation vernment Relations	
	Receipt For: Ag	gregate Year-to-Date ▼	
	Primary General		1
	Other (specify) ▼	500.00	
В.	Full Name (Last, First, Middle Initial) Ken Beebe		Date of Receipt
	Mailing Address 571 Highway 51 Ste H		09 24 2007
	City	ate Zip Code	Transaction ID: C347737
	Ridgeland M	S 39157-2597	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		250.00
	Legacy Care 1	cupation rner	
	Receipt For: Ag	gregate Year-to-Date ▼	
	Primary General	· · · · · · · · · · · · · · · · · · ·	1
	Other (specify) ▼	750.00	
<u> </u>	Full Name (Last, First, Middle Initial) Lyn Bentley		Date of Receipt
	Mailing Address 1201 L Street NW		09 18 2007
	City Si	ate Zip Code	Transaction ID: C345644
	<u>Washington</u> D	C 20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		20.00
	AHCA	cupation ector	
		gregate Year-to-Date ▼	
	Primary General		1
	Other (specify) 🔻	500.00	
Г			395.00
s	UBTOTAL of Receipts This Page (optional)		290.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 7/32 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Lyn Bentley Mailing Address 1201 L Street NW 09 26 2007 City State Zip Code Transaction ID: C347961 Washington DC 20005 Amount of Each Receipt this Period FEC ID number of contributing 20.00 C federal political committee. Name of Employer AHCA Occupation Director Receipt For: Aggregate Year-to-Date 🔻 Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lyn Bentley Date of Receipt Mailing Address 1201 L Street NW 0 9 28 2007 City State Zip Code Transaction ID: C348120 Washington DC 20005 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer AHCA Occupation Director Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. William Biggs Date of Receipt Mailing Address 101 Grace Street 2007 09 27 City State Zip Code Transaction ID: C348029 Easley SC 29640 Amount of Each Receipt this Period FEC ID number of contributing 3500.00 C federal political committee. Name of Employer Health Managemnet Resourc-Occupation **Executive Director** Receipt For: Aggregate Year-to-Date ▼ General Primary 5000.00 Other (specify) 3620.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Llac concrete cohodula(a)		FOR LINE NUMBER: PAGE 8/32
			or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full)	arric aria add	arcas or arry political committee to	Solicit Contributions from Such Committee.
\rangle	American Health Care Association Politi	cal Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Jim Birchem			Date of Receipt
	Mailing Address 211 1 st Street SE			09 / 24 / 2007
	City	State	Zip Code	Transaction ID: C347821
	Little Falls	MN	56345	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Eldercare of Minnesota	Occupation President		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		950.00	
В.	Full Name (Last, First, Middle Initial) Linda Black-Kurek			Date of Receipt
	Mailing Address 7445 Liberty Woods Ln			09 / 28 / 2007
	City	State	Zip Code	Transaction ID: C348086
	Dayton	OH	45459-3911	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Liberty Health Care Corp	Occupation President		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		750.00	
<u> </u>	Full Name (Last, First, Middle Initial) Douglas Burr			Date of Receipt
	Mailing Address 1185 Wilde Run Court			0 9 1 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: C347113
	Roswell	GA	30075-7160	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer Cypress Healthcare Manage- ment	Occupation VP Finan		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	475.00	
s	UBTOTAL of Receipts This Page (optional)			550.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 32 (check only one) X 11a 11b 11c 12 15 16 17
Ar or	ny information copied from such Reports and Statem for commercial purposes, other than using the nam	ments may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Health Care Association Politica	l Action	Committee	
A. 3.	Name of Employer Sun Health Care		Zip Code 93001-3847 Government Relations Year-to-Date ▼	Date of Receipt M M C 2 7 2 0 0 7 Transaction ID: C348027 Amount of Each Receipt this Period 125.00 Date of Receipt
	Mailing Address 3075 E Thousand Oaks Blv City Westlake Village FEC ID number of contributing federal political committee. Name of Employer The Chase Group	State CA C Description Partner	Zip Code 91362-3402	Transaction ID: C348106 Amount of Each Receipt this Period 2500.00
C.	Name of Employer The Chase Group	State CA C Occupation Nursing F	Zip Code 91362-3402 Thome Consult Year-to-Date ▼ 5000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
s	UBTOTAL of Receipts This Page (optional)		·····	5125.00
т	OTAL This Period (last page this line number only))	>	

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 10/32
ıт	EMIZED RECEIPTS	or each category of the	(check only one)
••	LIVIIZED RECEII 13	Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	y information copied from such Reports and Statements r	nay not he sold or used by any nerso	
or	for commercial purposes, other than using the name and	address of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)		
$ \rangle$	American Health Care Association Political Action	on Committee	
\angle			
Α.	Full Name (Last, First, Middle Initial) Susan Chase		Date of Receipt
٠	Mailing Address 5374 Long Shadow Ct		M M / D D / Y Y Y Y
			09 28 2007
	City State	Zip Code	Transaction ID: C348107
	Westlake Village CA	91362-5223	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		2500.00
	federal political committee.		
	Name of Employer The Chase Group	tion	7
	Partne	r	
		ate Year-to-Date ▼	
	Primary General	5000.00	
	Other (specify) ▼		
_	Full Name (Last, First, Middle Initial)		
В.	Julie Cheeka		Date of Receipt
	Mailing Address 3614 Connecticut Ave NW		M M / D D / Y Y Y Y
	Apt 22	Zin Code	09 18 2007
	City State Washington DC	Zip Code	Transaction ID: C345645
		20008-2436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		11.54
	Name of Employer Occupa AHCA Sonior		
	Serilor	Director of Constituency Affair	
	Receipt For: Aggreg	ate Year-to-Date ▼	1
	Other (specify)	230.76	
_	Full Name (Last, First, Middle Initial)		2. (2.1)
C.	Julie Cheeka		Date of Receipt
	Mailing Address 3614 Connecticut Ave NW Apt 22		09 26 2007
	City State	Zip Code	Transaction ID: C347962
	<u>Washington</u> DC	20008-2436	Amount of Each Receipt this Period
	FEC ID number of contributing		11.54
	federal political committee.		11.54
	Name of Employer Occupa	tion	┪
		Director of Constituency Affair	
	- · · · · · · · · · · · · · · · · · · ·	ate Year-to-Date ▼	7
	Primary General	230.76	
	Other (specify) ▼	250.70	
6	UBTOTAL of Receipts This Page (optional)	.	2523.08
\vdash	ODITION OF TROCOPES THIS LAYE (OPTIONAL)		
Ιт	OTAL This Period (last page this line number only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persoress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Health Care Association Politic	cal Action	Committee	
۹.	Full Name (Last, First, Middle Initial) Robert M. Chur			Date of Receipt
	Mailing Address 7 Limestone Dr			09 24 2007
	City	State	Zip Code	Transaction ID: C347736
	Williamsville EEC ID number of contributing	NY	14221-7051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1250.00
	Name of Employer Elderwood Affiliates Inc	Occupation President		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		5000.00	
3.	Full Name (Last, First, Middle Initial) Heather Anne Cutler			Date of Receipt
-	Mailing Address 309 W Myrtle St			09 18 2007
	City	State	Zip Code	Transaction ID: C345656
	Alexandria	VA	22301-2428	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		14.29
	Name of Employer American Health Care Asso-	Occupation PAC Dire		
	ciation Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	200.06	
).	Full Name (Last, First, Middle Initial) Heather Anne Cutler			Date of Receipt
Mailing Address 309 W Myrtle St				09 / 26 / Y Y Y Y
	City	State	Zip Code	Transaction ID: C347974
	Alexandria	VA	22301-2428	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.29
	Name of Employer American Health Care Asso- ciation	Occupation PAC Dire		
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		200.06	
9	UBTOTAL of Receipts This Page (optional)			1278.58
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C]		FOR LINE NUMBER: PAGE 12/32
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12	
			Detailed Summary Page	13 14 15 16 17
۸r	ny information copied from such Reports and Sta	atomonte may	y not be cold or used by any pers	
or	for commercial purposes, other than using the r	name and add	from the sold of dised by any personal stress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American Health Care Association Politi	tical Action	Committee	
	American mealth Gare Association Follows	iicai Action	Committee	
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	Eduardo Gonzalez			Date of Receipt
	Mailing Address 118 B St			M M / D D / Y Y Y Y
				09 24 2007
	City	State	Zip Code	Transaction ID: C347826
	Fillmore	CA	93015-1763	Amount of Each Receipt this Period
	FEC ID number of contributing			100.00
	federal political committee.	C		100.00
	Name of Employer Fillmore Convalescent Cen-	Occupation		
	ter	President		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	250.00	1
	Other (specify)	0 0	200.00	_
В.	Full Name (Last, First, Middle Initial) Tim Graves			Date of Receipt
Ь.		l Class		•
	Mailing Address 4214 Medical Pkwy. 3rd	Floor		09 26 2007
	City	State	Zip Code	Transaction ID: C347960
	Austin	TX	78756	Amount of Each Receipt this Period
		1/	78730	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	rederal political committee.			
	Name of Employer Texas Health Care Associa-	Occupation	າ	7
	tion	President	t	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)		500.00	
_	Full Name (Last, First, Middle Initial)			
C.				Date of Receipt
	Mailing Address 11337 Louisiana Cir			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	Ctoto	Zin Codo	
	City	State	Zip Code	Transaction ID: C347824
	Bloomington	MN	55438-2827	Amount of Each Receipt this Period
	FEC ID number of contributing	C		300.00
	federal political committee.			
	Name of Employer	Occupation	1	\neg
	Information Requested	Homema		
	Receipt For:		Year-to-Date ▼	
	Primary General	33 0 **		7
	Other (specify) ▼		400.00	
				-
	1			
s	UBTOTAL of Receipts This Page (optional)		1	900.00
\vdash	ago (optional)			-

0	CHEDIII E A /EEC Form 2V)			FOR LINE NUMBER: PAGE 13/32
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS			or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δr	ny information copied from such Reports and Sta	atemente may	y not be sold or used by any ners	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American Health Care Association Politi	tical Action	Committee	
	American mealth Gare Association Follows	lical Action	Committee	
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	Vicki Groff			Date of Receipt
	Mailing Address 11337 Louisiana Cir			M M / D D / Y Y Y Y
				09 28 2007
	City	State	Zip Code	Transaction ID: C348113
	Bloomington	MN	55438-2827	Amount of Each Receipt this Period
	FEC ID number of contributing			100.00
	federal political committee.	C		100.00
	Name of Employer Information Requested	Occupation		
		Homema		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		400.00	1
	Other (specify)		400.00]
_	Full Name (Last, First, Middle Initial)			D. (D.)
В.				Date of Receipt
	Mailing Address 7605 Ridgecrest Dr			0 9 1 8 2 0 0 7
	City	State	Zip Code	
	•		•	Transaction ID: C345648
	Alexandria	VA	22308-1049	Amount of Each Receipt this Period
	FEC ID number of contributing	C		43.65
	federal political committee.			
	Name of Employer AHCA	Occupation	1	\neg
	AHCA	1	ce President of Advocacy	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			7
	Other (specify) ▼		809.48	
				*
	Full Name (Last, First, Middle Initial)			
C.	David Hebert			Date of Receipt
	Mailing Address 7605 Ridgecrest Dr			M M / D D / Y Y Y Y
	0::			09 26 2007
	City	State	Zip Code	Transaction ID: C347965
	Alexandria	VA	22308-1049	Amount of Each Receipt this Period
	FEC ID number of contributing	С		43.65
	federal political committee.			10.00
	Name of Employer	Occupation	<u> </u>	\dashv
	Name of Employer AHCA		ce President of Advocacy	
	Receipt For:		Year-to-Date ▼	\dashv
	Primary General	, .gg. ogale	10 2010 🔻	7
	Other (specify)		809.48	
		0 0	1 1 1 1 1 1 1	-
	I			
_	IIPTOTAL of Descripts This Dags (anticard)			187.30
\vdash	UBTOTAL of Receipts This Page (optional)			
1				

PAGE 14/32 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Jon Hoffman Mailing Address 4892 Blazer Pkwy 09 2007 24 Zip Code City State Transaction ID: C347738 Dublin OH 43017-3302 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer MNS Occupation COO Receipt For: Aggregate Year-to-Date 🔻 Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cheryl Killian Date of Receipt Mailing Address 3801 Woodside Dr 0 9 26 2007 City State Zip Code Transaction ID: C347841 Arlington TX 76016-3030 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Legacy Care Centers Inc. Occupation President Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) C. Edward L. Kuntz Date of Receipt Mailing Address 680 S 4th St 2007 09 26 City State Zip Code Transaction ID: C347842 Louisville KY 40202-2407 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Kindred Healthcare Occupation Chairman, CEO & President Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 775.00 SUBTOTAL of Receipts This Page (optional)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Health Care Association Politic	cal Action	Committee	
۸.	Full Name (Last, First, Middle Initial) David Kyllo Mailing Address 4621 28th Road South PAYROLL DEDUCTION City	State	Zip Code	Date of Receipt M M M
	Arlington	VA	22206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	22200	39.56
	Name of Employer AHCA Receipt For: Primary General Other (specify) ▼		n Assisted Living e Year-to-Date ▼	
3.	Full Name (Last, First, Middle Initial) David Kyllo Mailing Address 4621 28th Road South PAYROLL DEDUCTION			Date of Receipt M
	City	State	Zip Code	Transaction ID: C347968
	Arlington	VA	22206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		39.56
	Name of Employer AHCA		Assisted Living	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 791.20	
— Э.	Full Name (Last, First, Middle Initial) Cynthia Leach			Date of Receipt
Mailing Address 4943 East Evans Drive				09 / 24 / 2007
	City Scottsdale	State AZ	Zip Code 85254-2824	Transaction ID: C347809
	FEC ID number of contributing federal political committee.	C	03234-2024	Amount of Each Receipt this Period 100.00
	Name of Employer CopperSands Inc.	Occupation VP	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
S	UBTOTAL of Receipts This Page (optional)			179.12
T	OTAL This Period (last page this line number on	lv)		

0	CHEDIII E A /EEC Earm 2V)			FOR LINE NUMBER: PAGE 16/32
3	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
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			Detailed Summary Page	13 14 15 16 17
Δ	ny information copied from such Reports and Sta	ntomonte may	y not be cold or used by any pers	
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American Health Care Association Polit	tical Action	Committee	
	American mealth date Association 1 oil	lical Action	Committee	
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	Cynthia Leach			Date of Receipt
	Mailing Address 4943 East Evans Drive			M M / D D / Y Y Y Y
				09 24 2007
	City	State	Zip Code	Transaction ID: C347810
	Scottsdale	AZ	85254-2824	Amount of Each Receipt this Period
	FEC ID number of contributing			100.00
	federal political committee.	C		100.00
	Name of Employer CopperSands Inc.	Occupation	1	
		VP		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		300.00	11
	Other (specify)			1
В.	Full Name (Last, First, Middle Initial) Vincent Lee			Date of Receipt
υ.				<u> </u>
	Mailing Address 3675 Kilauea Ave			09 13 2007
	City	State	Zip Code	Transaction ID: C347110
	Honolulu	HI	96816-2333	Amount of Each Receipt this Period
		1.11	50010 2000	Amount of Each recorpt this i chea
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Oahu Region, Leahi	Occupation	1	
	Oand Region, Leani	CEO		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	, ,	250.00	1
	Other (specify)		250.00	
C.	Full Name (Last, First, Middle Initial) Vincent Lee			Date of Receipt
Ο.	Mailing Address 3675 Kilauea Ave			M M / D D / Y Y Y Y
	Walling Address So/S Kilauea Ave			09 24 2007
	City	State	Zip Code	Transaction ID: C347811
	Honolulu	HI	96816-2333	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		100.00
	Name of Employer Oahu Region, Leahi	Occupation	1	
		CEO	· · · · ·	_
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	
	Other (specify)	0 0		1
				300.00
Ls	UBTOTAL of Receipts This Page (optional)			000.00

0	CHEDIII E A /EEC Form 2V)]		FOR LINE NUMBER: PAGE 17/32
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS			or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Δr	y information copied from such Reports and Sta	atements may	y not be sold or used by any ners	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American Health Care Association Poli	tical Action	Committee	
\angle				
Α.	Full Name (Last, First, Middle Initial) William Levering			Date of Receipt
۸.	Mailing Address 201 North Main St.			M M / D D / Y Y Y Y
				09 24 2007
	City	State	Zip Code	Transaction ID: C347740
	Mount Vernon	OH	43050	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	2000.00
	federal political committee.	C		2000.00
	Name of Employer	Occupation	 1	\dashv
	Name of Employer Levering Management Inc.	President		
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		2222.22	1
	Other (specify)		3000.00	
В.	Full Name (Last, First, Middle Initial) Tim Lukenda			Date of Receipt
٥.	Mailing Address 209 East Portage Avenu			M M / D D / Y Y Y Y
	Zoo Last i ortage / tvoii	uo		09 18 2007
	City	State	Zip Code	Transaction ID: C345639
	Sault Sainte Marie	MI	49783	Amount of Each Receipt this Period
	FEC ID number of contributing			400.00
	federal political committee.	C		400.00
	Name of Employer	Occupation	 1	\dashv
	Name of Employer Tendercare (Michigan) Inc.	President		
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General	-	1400.00	1
	Other (specify) ▼		1400.00	
_	Full Name (Last, First, Middle Initial)			
C.	Lee Marchant			Date of Receipt
	Mailing Address 3800 W Gifford Rd			M M / D D / Y Y Y Y
	0.1	01-1-	7'- 0-4-	09 20 2007
	City Bloomington	State IN	Zip Code	Transaction ID: C347473
		IIN	47403-2612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer LJM Enterprises	Occupation		
	·	President		\dashv
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		1000.00	
	Caro. (openiy) 🔻	-	0 0 0 0 0 0 0	1
ا و	UBTOTAL of Receipts This Page (optional)			2650.00
\vdash	22.2.7.2 of recorpto time rage (optional)			-

C				FOR LINE NUMBER: PAGE 18/32						
5	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		(check only one)						
ITEMIZED RECEIPTS		or each category of the		X 11a 11b 11c 12						
			Detailed Summary Page	13 14 15 16 17						
Δr	y information copied from such Reports and St	atements may	y not be sold or used by any pers							
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)									
$ \rangle$	American Health Care Association Poli	tical Action	Committee							
	American realth date Association Follows	tical / totion	Committee							
	Full Name (Last, First, Middle Initial)									
A.	Michael Meillier			Date of Receipt						
	Mailing Address 27 Brand Ave			M M / D D / Y Y Y Y						
	PO BOX			09 20 2007						
	City	State	Zip Code	Transaction ID: C347517						
	<u>Faribault</u>	MN	55021-6411	Amount of Each Receipt this Period						
	FEC ID number of contributing			005.00						
	federal political committee.	C		225.00						
		1		_						
	Name of Employer Pleasant Manor Inc	Occupation								
			ervices Dir							
	Receipt For:	Aggregate	e Year-to-Date ▼							
	Primary General	' '	400.00	11						
	Other (specify)		100.00	1						
В.	Full Name (Last, First, Middle Initial) Michael Meillier			Date of Receipt						
Ь.				-						
	Mailing Address 27 Brand Ave PO BOX			09 24 2007						
	City	State	Zip Code	Transaction ID: C347820						
	Faribault	MN	55021-6411	Amount of Each Receipt this Period						
		IVIIN	33021-0411	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		100.00						
	rederal political committee.									
	Name of Employer Pleasant Manor Inc	Occupation	า	\neg						
	Pleasant Manor Inc	Social Se	ervices Dir							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		400.00	1						
	Other (specify)		400.00							
_	Full Name (Last, First, Middle Initial)									
Ċ.	Lisa Mitchell			Date of Receipt						
	Mailing Address 214 S Munson Rd			09 20 2007						
	Road City	State	Zip Code							
		OH		Transaction ID: C347656						
	Swanton	ОП	43558-1210	Amount of Each Receipt this Period						
	FEC ID number of contributing	C		250.00						
	federal political committee.									
	Name of Employer Swanton Health Care	Occupation	า							
	Swanton Health Care	Owner								
	Receipt For:	Aggregate	Year-to-Date ▼	7						
	Primary General			7						
	Other (specify) ▼		250.00							
s	UBTOTAL of Receipts This Page (optional)			575.00						
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19 / 32							
ITEMIZED RECEIPTS		or each category of the	(check only one)							
TI LIVIIZED TIEOLII 13		Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17							
Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
American Health Care Association Political	tical Action	Committee								
/										
Full Name (Last, First, Middle Initial) A. Michael Morton			Date of Receipt							
Mailing Address 415 Rogers Ave			M M / D D / Y Y Y Y							
			09 21 2007							
City	State	Zip Code	Transaction ID: C347658							
Fort Smith	AR	72901-1903	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		1250.00							
Name of Employer Central Arkansas Nursing	Occupatio	n	7							
Ctrs	Owner									
Receipt For:	Aggregate	e Year-to-Date ▼								
Primary General		5000.00	1							
Other (specify)		3000.00								
Full Name (Last, First, Middle Initial)			+							
Roberts Nelson			Date of Receipt							
Mailing Address 3075 E Thousand Oaks	M M / D D / Y Y Y Y									
Oit.	09 28 2007									
City Westlake Village	State CA	Zip Code 91362-3402	Transaction ID: C348105							
-	UA	91302-3402	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		2500.00							
			_							
Name of Employer The Chase Group	Occupatio	n								
Receipt For:	Partner	e Year-to-Date ▼	_							
Primary General	Aggregate	e real-lo-Dale V	1							
Other (specify)		5000.00								
			1							
Full Name (Last, First, Middle Initial) C. Francesca Fierro O'Reilly			Date of Receipt							
Mailing Address 4005 Nellie Custis Dr			M M / D D / Y Y Y Y							
			09 18 2007							
City	State	Zip Code	Transaction ID: C345649							
Arlington	VA	22207-5107	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		20.00							
Name of Employer Sr. Director of Congressi-	Occupatio		7							
onal Affairs		n Health Care Association								
Receipt For:	Aggregate	e Year-to-Date ▼								
Primary General	, ,	400.00] [
Other (specify)		100.00	1							
SUBTOTAL of Receipts This Page (optional)			3770.00							
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C		[FOR LINE NUMBER: PAGE 20 / 32						
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)						
IT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12						
			Detailed Summary Page	13 14 15 16 17						
Δ	ny information copied from such Reports and Sta	ntomonte may	y not be cold or used by any perce							
or	for commercial purposes, other than using the n	name and add	dress of any political committee to	solicit contributions from such committee.						
\setminus	NAME OF COMMITTEE (In Full)									
	American Health Care Association Polit	ical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Francesca Fierro O'Reilly			Date of Receipt						
	Mailing Address 4005 Nellie Custis Dr			09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City	State	Zip Code	Transaction ID: C347966						
	Arlington	VA	22207-5107	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		20.00						
	Name of Employer Sr. Director of Congressional Affairs Receipt For: Primary General Other (specify)		Health Care Association Year-to-Date ▼ 400.00]						
— В.	Full Name (Last, First, Middle Initial) Stephen Reissman			Date of Receipt						
	Mailing Address 5120 W Goldleaf Cir Ste 400			09 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City	State	Zip Code	Transaction ID: C348084						
	Los Angeles	CA	90056-1297	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		1250.00						
	Name of Employer Country Villa Health Services Receipt For: Primary General	Occupation President Aggregate								
	Other (specify) ▼	0 0]						
C.	Full Name (Last, First, Middle Initial) Leonard Russ			Date of Receipt						
	Mailing Address 40 Keogh Ln			09 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City	State	Zip Code	Transaction ID: C347107						
	New Rochelle	NY	10805-1308	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		1000.00						
	Name of Employer Bayberry Nursing Home	Occupation Administr		7						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2000.00							
s	UBTOTAL of Receipts This Page (optional))	2270.00						
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21/32
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and Sta	tements may	v not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
/	American Health Care Association Politi	cal Action	Committee	
۹.	Full Name (Last, First, Middle Initial) Daniel Salmon			Date of Receipt
	Mailing Address 85 Beaumont Dr			09 / 28 / 2007
	City	State	Zip Code	Transaction ID: C348085
	Northbridge	MA	01534-1093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer Beaumont Nursing Home	Occupation Administ		
	Receipt For:		e Year-to-Date ▼	7
	Primary General		500.00	
	Other (specify)	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) Michael Scharfenberger			Date of Receipt
	Mailing Address 7265 Kenwood Rd Ste 300			09 / 19 / 2007
	City	State	Zip Code	Transaction ID: C347247
	Cincinnati	OH	45236-4414	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer Nursing Care Management	Occupation Exec Vice	n e President	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial)			Date of Descript
J.	Linda Sechovec Mailing Address 4411 McLeod Rd NE			Date of Receipt
	Ste G			09 28 2007
	City	State	Zip Code	Transaction ID: C348090
	Albuquerque	NM	87109-2232	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer New Mexico Health Care As-	Occupation	n e Director	
	sn Receipt For:		e Year-to-Date ▼	
	Primary General		600.00	
	Other (specify)		600.00	
s	UBTOTAL of Receipts This Page (optional)			350.00
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T	OTAL This Period (last page this line number or	าเง)		

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 11a 11b 11b 14	PAGE 22/32 11c
Any informa	ation copied from such Reports and Sta nercial purposes, other than using the na	tements may ame and add	y not be sold or used by any persodress of any political committee to	n for the purpose of solic solicit contributions from	iting contributions such committee.
1	DF COMMITTEE (In Full) an Health Care Association Politi	cal Action	Committee		
Full Nam A. Louis Se Mailing A City Weirto FEC ID federal p Name of Weirton Receipt Pr Ot Full Nam Marjorie	ne (Last, First, Middle Initial) Address 2525 Pennsylvania Ave number of contributing solitical committee. Employer Geriatric Center For: imary General her (specify) ne (Last, First, Middle Initial)	State WV C Occupation Owner/A	Zip Code 26062-3634	Date of Receipt M M M / D D D O 9 1 9 Transaction ID: C: Amount of Each Re Date of Receipt M M M / D D O 9 2 7 Transaction ID: C:	347255 seeipt this Period 500.00
Name of Fall Cred lage Receipt	number of contributing political committee. Employer ek Retirement Vil-	Occupation Owner Aggregate	46064 n e Year-to-Date ▼ 5000.00	Amount of Each Re	eceipt this Period 1250.00
City Fairfax FEC ID federal p Name of AHCA Receipt Pr	Address 9507 Shelly Krasnow Ln number of contributing political committee. Employer	State VA C Occupation Vice Pres		Date of Receipt M M M / D D O 9 18 Transaction ID: C: Amount of Each Re	345650
SUBTOTA	L of Receipts This Page (optional)				1761.54
TOTAL TH	nis Period (last page this line number or	nlv)	.		

SCHEDULE A (FEC Form 3X)			11	FOR LINE NUMBER: PAGE 23 / 32					
		Use separate schedule(s) or each category of the	(check only one)						
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
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Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any person	on for the purpose of soliciting contributions					
or		ame and add	aress or any political committee to	solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)	·	O						
	American Health Care Association Polit	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Jennifer Shimer			Date of Receipt					
	Mailing Address 9507 Shelly Krasnow Lr	1		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: C347967					
	Fairfax	VA	22031-4720	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	С		11.54					
	Name of Employer AHCA	Occupation		7					
	Receipt For:	Vice Pres	e Year-to-Date ▼						
	Primary General	Aggregate	Flear-to-Date V	1					
	Other (specify)		230.76						
			0 0 0 0 0 0 0						
В.	Full Name (Last, First, Middle Initial) Annette Shimpkins			Date of Receipt					
	Mailing Address PO Box 663			M ' M / D ' D / Y ' Y ' Y ' Y					
				09 04 2007					
	City	State	Zip Code	Transaction ID: C347251					
	Quitman	TX	75783-0663	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		300.00					
	federal political committee.								
	Name of Employer Information Requested	Occupation							
		Administ							
	Receipt For:	Aggregate	e Year-to-Date ▼						
	Primary General Other (specify)		300.00						
	Carici (Specify)	0 0	0 0 0 0 0 0 0						
<u> </u>	Full Name (Last, First, Middle Initial) Rodney B Slone			Date of Receipt					
	Mailing Address 1100 N 4th St			M M / D D / Y Y Y Y					
				09 28 2007					
	City	State	Zip Code	Transaction ID: C348104					
	Longview	TX	75601-4739	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		100.00					
	federal political committee.								
	Name of Employer Highland Pines Nursing &	Occupation							
	Rehab	Medical [
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify)		400.00						
	Cutor (opeony)	-	0 0 0 0 0 0 0	1					
s	UBTOTAL of Receipts This Page (optional)			411.54					
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUM	
ITEMIZED RECEIPTS		or each category of the	(check only one)		
••	LIVIIZED RECEII 13		Detailed Summary Page		11b 11c 12
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or	ly information copied from such Reports and Statements for commercial purposes, other than using the name an	is may	rnot be sold or used by any perso Iress of any political committee to	solicit contributions	s from such committee.
	NAME OF COMMITTEE (In Full)				
$ \rangle$	American Health Care Association Political Ac	ction	Committee		
\angle					
	Full Name (Last, First, Middle Initial)			5. (5	
Α.	Todd Smith Mailing Address 5902 Carlton I n			Date of Rece	<u> </u>
	Mailing Address 5902 Carlton Ln			0 9	28 2007
	City Stat	te	Zip Code	Transaction	ID: C348117
	Bethesda MD)	20816-2308		ach Receipt this Period
	FEC ID number of contributing				F00.00
	federal political committee.				500.00
	VICV , ,	pation	1	7	
	LODG	•			
		regate	Year-to-Date ▼	.	
	Primary General Other (specify) ▼		500.00		
	Cutch (Speedily)		0 0 0 0 0 0 0		
_	Full Name (Last, First, Middle Initial)			5 . (5	
В.	Matthew D. Smyth Mailing Address 1201 L Street NW			Date of Rece	<u>'</u>
	Mailing Address 1201 L Street NW			0 9	18 2007
	City Stat	te	Zip Code	Transaction	ID: C345654
	Washington DC	;	20005		ach Receipt this Period
	FEC ID number of contributing	-			· · · · · · · · · · · · · · · · · · ·
	federal political committee.				31.25
	Name of Employer Occu	ınatior	<u> </u>	_	
	American I lealth Care Acce	•	of Grassroots		
	Giation		Year-to-Date ▼		
	Primary General		004.05		
	Other (specify) ▼		281.25		
_	E III				
C.	Full Name (Last, First, Middle Initial) Matthew D. Smyth			Date of Rece	pint
٠.	Mailing Address 1201 L Street NW				
				0 9	26 2007
	City Stat		Zip Code	Transaction	ID: C347972
	<u>Washington</u> DC	;	20005	Amount of E	ach Receipt this Period
	FEC ID number of contributing federal political committee				31.25
	federal political committee.				
	Name of Employer American Health Care Asso-	pation	1	7	
	ciation		of Grassroots		
		regate	Year-to-Date ▼		
	Primary General		281.25		
	Other (specify) ▼	0		1	
Г	L				· · · · · · · · · · · · · · · · · · ·
s	UBTOTAL of Receipts This Page (optional)				562.50
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т	OTAL This Period (last page this line number only)				

PAGE 25/32 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt **Brad Stebbins** Mailing Address 600 E Whaley St 09 2007 28 Zip Code City State Transaction ID: C348102 Longview TX 75601-6525 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 C federal political committee. Name of Employer Stebbins Five Companies Occupation Owner Receipt For: Aggregate Year-to-Date 🔻 Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dick Stebbins Date of Receipt Mailing Address 600 E Whaley St 0 9 05 2007 City State Zip Code Transaction ID: C347206 Longview TX 75601-6525 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Stebbins Five Companies Occupation Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) C. Jan Thayer Date of Receipt Mailing Address 404 Woodland Dr 2007 09 28 Zip Code Citv State Transaction ID: C348087 Grand Island NE 68801 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 C federal political committee. Name of Employer Riverside Lodge Occupation Owner/Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 7500.00 SUBTOTAL of Receipts This Page (optional)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Health Care Association Politic	cal Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Travis Tomlinson Mailing Address 513 E Whitaker Mill Rd City Raleigh FEC ID number of contributing federal political committee. Name of Employer Mayview Conv Home Inc Receipt For:	State NC C Occupation Administ Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	2000.00	
3.	W Parker Tomlinson Mailing Address 513 E Whitaker Mill Rd City	State	Zip Code	Date of Receipt M M
Raleigh NC FEC ID number of contributing federal political committee.			27608-2633	Amount of Each Receipt this Period 75.00
	Name of Employer Mayview Convalescent Center Receipt For: Primary General Other (specify) ▼	Occupation Vice Pres		
D .	Full Name (Last, First, Middle Initial) Marilyn K. Weber Mailing Address PO Box 386			Date of Receipt 0 9 2 8 2 0 0 7
	City Wellington FEC ID number of contributing federal political committee.	State OH	Zip Code 44090-0386	Transaction ID: C348108 Amount of Each Receipt this Period 300.00
	Name of Employer Weber Health Care Center, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Superinte Aggregate		
SI	UBTOTAL of Receipts This Page (optional)			875.00
т	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Other (specify)

FOR LINE NUMBER: PAGE 27/32 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Andrew S Weisman Date of Receipt Mailing Address 5310 NW 33rd Ave 09 04 2007 Ste 211 City State Zip Code Transaction ID: C347204 Fort Lauderdale FL 33309-6319 Amount of Each Receipt this Period FEC ID number of contributing C 1250.00 federal political committee. Name of Employer NuVision Management Occupation Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General

3750.00

SUBTOTAL of Receipts This Page (optional)	•	1250.00
TOTAL This Period (last page this line number only)	•	37808.66

S	CHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)		-	E NUMBER: PAGE 28/32								
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	NAME OF COMMITTEE (In Full) American Health Care Association Politic	al Action Co	ommittee											
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	Mailing Address PO Box 819 Operations Center		0 9		3	3 0		2	007					
	City Wilson	State NC	Zip Code 27894-0819			Amou	nt of	f Each	ı D	isburse	men			od
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	Senate President	Primary Other (spec	General cify) ▼											
В.	State: District: Full Name (Last, First, Middle Initial) BB & T					Transaction ID: D54340 Date of Disbursement				V				
	Mailing Address PO Box 819 Operations Center					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
	City Wilson	State NC	Zip Code 27894-0819			Amou	nt of	f Each	ı D	isburse	men			bc
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	Candidate Name				gory/ pe									
	Office Sought: House Senate President State: District:	Primary Other (spec	General cify) ▼											

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SUBTOTAL of Disbursements This Page (optional)	<u> </u>	611.72
TOTAL This Period (last page this line number only)	•	611.72

SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check onl	NUMBER: PAGE 29/32 vione)						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b		
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NAME OF COMMITTEE (In Full)	le and address of any political col	minilitée to so	oncit contribu	tions from	i such cor	mmuee			
American Health Care Association Politic	al Action Committee								
Full Name (Last, First, Middle Initial)			Transac	tion ID: D	54171				
Becerra for Congress				Disbursem		V . V	V		
Mailing Address 1910 W Sunset Blvd Ste 540			0 9	11	<u> </u>	ž 0 ŏ 7			
City Los Angeles	State Zip Code CA 90026-4991		Amount	of Each D	isbursem	ent this P	eriod		
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Full Name (Last, First, Middle Initial) Friends of Mary Landrieu				tion ID: D Disbursem					
Mailing Address 841 Carondelet St			0 9	14) / Y	ž 0 ŏ 7	Y		
City New Orleans	State Zip Code LA 70130-3707		Amount	of Each D	isbursem				
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HAWKEYE PAC, THE			Date of D	tion ID: D Disbursem	ent	V * V *	V		
Mailing Address PO Box 7255			0 9	14		ž 0 ŏ 7	Ť		
City Des Moines	State Zip Code IA 50309		Amount	of Each D	isbursem	ent this P	eriod		
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Candidate Name		Category/ Type							
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	STIEDOLE B (I LOT OTTI 3X)	Use seperate schedule(LINE N k only	NUMBE	:K:			PAC	àE 30 /	/ 32		
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		F	_	ıb 🗀	22 28a	Х	23 28b	Н	24 28c	25 29	26 30b		
	y Information copied from such Reports and Staten														
or	for commercial purposes, other than using the nam	e and address of any politic	cai com	nn	nittee	to solic	cit conti	ribut	ions tr	om s	sucn co	mmittee	•		
$ \rangle$	NAME OF COMMITTEE (In Full) American Health Care Association Political	al Action Committee													
_	Full Name (Last, First, Middle Initial)						Trans	sacti	on ID	: D5	4175				
Α.	ORRIN PAC							_	isburs		nt				
	Mailing Address PO Box 1480							М	/ D	1 4	/ L	žoŏ	7 [*]		
	City	State Zip Code	_				Amou	ınt o	f Each	n Disl	bursem	ent this	Period		
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_	Full Name (Last, First, Middle Initial)						_				4400				
В.	PAC to the Future						Transaction ID: D54123 Date of Disbursement								
	Mailing Address 430 S. Capitol St. SE 1st Flr.						0 9			2 1	Ĺ	žoŏ	7		
	City Washington	State Zip Code DC 20003					Amount of Each Disbursement this Period 1500.00								
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	Senate President	ement For: Primary Genera Other (specify) ▼	ıl												
	State: District: Full Name (Last, First, Middle Initial)														
C.	CHET EDWARDS FOR CONGRESS						Date		ion ID isburs		— .	Y Y	· Y		
	Mailing Address PO Box 23273								2	2 1		žoŏ	7		
	City WACO	State Zip Code TX 76702					Amou	ınt o	f Each	n Disl	bursem	ent this			
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American Health Care Association Political	Action Committee										
Full Name (Last, First, Middle Initial)						-	D5417	4			
VAN HOLLEN FOR CONGRESS						sburse		Y Y	Υ.	Υ	
Mailing Address 10537 St. Paul Street				0 ^M 9		1	4 /	2	0 ŏ 7		
	State Zip Code MD 20895			Amo	unt of	Each	Disburse	emen	t this P	eriod	
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Contributions To Federal Candidates					-		•	-	-		
Candidate Name Rep. Chris Van Hollen Jr.		Cate Ty	gory/ pe								
Office Sought: X House Disburser Senate X											
President	Primary General Other (specify)										
State: MD District: 8	(1										
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PERLMUTTER FOR CONGRESS						sburse		· · · · · ·	* */*	V	
Mailing Address 3440 Youngfield St #264				$\begin{array}{c c} & & & \\ \hline & 0 & 9 & \\ \hline \end{array} \begin{array}{c c} & & & \\ \hline & 1 & 1 \\ \hline \end{array} \begin{array}{c c} & & & \\ \hline & 2 & 0 & 0 & 7 \\ \hline \end{array}$						Y	
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State: CO District: 7	Caron (openity)										
Full Name (Last, First, Middle Initial) SANFORD D. BISHOP JR. FOR CONGRE	SS					on ID: sburse	D5417	2			_
Mailing Address D. O. Day 000				0 9					Υ		
Mailing Address P. O. Box 909				2007							
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Candidate Name Rep. Sanford Bishop Jr.											
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NAME OF COMMITTEE (In Full) American Health Care Association Politica	I Action Committee														
Full Name (Last, First, Middle Initial)				Т	ransac	tion ID:	D5416	9							
PRICE FOR CONGRESS						Disburse / D		V V	· V	V					
Mailing Address 1970 Roswell Rd.					0 9	1	0 /	2	0 ŏ 7						
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Marietta Purpose of Disbursement	GA 30062-3902			- [•		1	000.0	0					
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Full Name (Last, First, Middle Initial) 3. ZACK SPACE FOR CONGRESS COMMIT	TFF						D5417	0							
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Mailing Address 714 N WOOSTER AVEN				09 10 7 2007											
City DOVER	State Zip Code OH 44622			A	mount	of Each	Disburse	ement	this P	eriod					
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Full Name (Last, First, Middle Initial) PEOPLE FOR PETE DOMENICI				_		t ion ID: Disburse	D5416	8							
Mailing Address 8500 Menaul Blvd NE							D /	Y Y	0 ŏ 7	Υ					
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City Albuquerque	State Zip Code NM 87112-3500			A	mount	of Each	Disburse	ement	this P	eriod					
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